



THOMAS L. GARTHWAITE, M.D.
Director and Chief Medical Officer

FRED LEAF
Chief Operating Officer

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES
313 N. Figueroa, Los Angeles, CA 90012
(213) 240-8101

BOARD OF SUPERVISORS

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July 28, 2005

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Dear Supervisors:

**REQUEST TO ACCEPT COMPROMISE OFFER OF SETTLEMENT
(ALL DISTRICTS AFFECTED - 3 VOTES)**

IT IS RECOMMENDED THAT YOUR BOARD:

Authorize the Director of Health Services or his designee to accept the attached compromise offers of settlement, pursuant to Section 1473 of the Health and Safety Code, for the following individual accounts for patients who received medical care at a County facility:

(1)	Account Number	H/UCLA - 6528074	\$604,768
(2)	Account Number	LAC+USC- 1114423	\$291,517
(3)	Account Number	LAC+USC - 2702696	\$229,538
(4)	Account Number	LAC+USC - 1294663	\$158,105
(5)	Account Number	H/UCLA - 6618921	\$128,000

PURPOSE OF THE RECOMMENDED ACTION:

The compromise offer of settlement for patient account (1) - (5) are recommended because the amounts are the highest amounts that could be negotiated with the patients' insurance (Commercial or HMO) under the circumstances of the case, and receipt of such insurance proceeds prevents further collection from the patients, except for possible beneficiary coinsurance or deductible obligations.

JUSTIFICATION:

The best interests of the County would be served by the approval of these compromises since it will enable DHS to maximize net revenue on these accounts.

"To Enrich Lives Through Effective And Caring Service"

FISCAL IMPACT:

This will expedite the County's recovery of partial payment totaling approximately \$1,411,928.

FINANCING:

Not applicable.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS:

On January 8, 2002 the Board approved an ordinance granting the Director of Health Services (Director) authority to reduce patient account liabilities when it is in the best interest of the County to do so. The ordinance was adopted by the Board on January 15, 2002.

Under County Code Chapter Section 2.76.046, the Director has the authority to reduce patient account liabilities by the greater of i) \$15,000, or ii) \$75,000 or 50% of the account balance, whichever is less. Any reduction exceeding the Director's authority requires Board approval.

The compromise of these accounts is not within the Director's authority, so the Director is requesting Board approval of these compromises.

CONTRACTING PROCESS:

Not applicable.

IMPACT ON CURRENT SERVICES (OR PROJECTS):

Maximizing net revenues on these accounts will help DHS meet its budgeted revenue amounts.

When approved, DHS requires three signed copies of the Board's action.

Respectfully submitted,


Thomas L. Garthwaite, M.D.
Director and Chief Medical Officer

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Attachments

c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES

TRANSMITTAL No. 1
DATE: July 28, 2005

Total Charges	\$755,960	Account Number	6528074
Amount Paid	\$0	Service Type	Inpatient
Balance Due	\$755,960	Date of Service	11/18/2004-01/17/2005
Compromise Amount Offered	\$604,768	% Of Charges	80%
Amount to be Written Off	\$151,192	Facility	H/UCLA Medical Center

JUSTIFICATION

The above compromise offer of settlement is the highest amount that could be negotiated with the patient's insurance (Commercial or HMO) under the circumstances of the case.

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES

TRANSMITTAL No. 2
DATE: July 28, 2005

Total Charges	\$438,305	Account Number	1114423
Amount Paid	\$59,127	Service Type	Inpatient
Balance Due	\$379,178	Date of Service	03/07/2004-05/06/2004
Compromise Amount Offered	\$291,517	% Of Charges *	67%
Amount to be Written Off	\$87,661	Facility	LAC+USC Medical Center

JUSTIFICATION

The above compromise offer of settlement is the highest amount that could be negotiated with the patient's insurance (Commercial or HMO) under the circumstances of the case.

* Total payment of \$350,644 (\$59,127 plus \$291,517) is 80% of charges.

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES

TRANSMITTAL No. 3
DATE: July 28, 2005

Total Charges	\$327,912	Account Number	2702696
Amount Paid	\$0	Service Type	Inpatient
Balance Due	\$327,912	Date of Service	04/08/2005-05/04/2005
Compromise Amount Offered	\$229,538	% Of Charges	70%
Amount to be Written Off	\$98,374	Facility	LAC+USC Medical Center

JUSTIFICATION

The above compromise offer of settlement is the highest amount that could be negotiated with the patient's insurance (Commercial or HMO) under the circumstances of the case.

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES

TRANSMITTAL No. 4
DATE: July 28, 2005

Total Charges	\$263,508	Account Number	1294663
Amount Paid	\$0	Service Type	Inpatient
Balance Due	\$263,508	Date of Service	02/05/2005-03/01/2005
Compromise Amount Offered	\$158,105	% Of Charges	60%
Amount to be Written Off	\$105,403	Facility	LAC+USC Medical Center

JUSTIFICATION

The above compromise offer of settlement is the highest amount that could be negotiated with the patient's insurance (Commercial or HMO) under the circumstances of the case.

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES

TRANSMITTAL No. 5
DATE: July 28, 2005

Total Charges	\$219,298	Account Number	6618921
Amount Paid	\$0	Service Type	Inpatient
Balance Due	\$219,298	Date of Service	12/25/2004-01/10/2005
Compromise Amount Offered	\$128,000	% Of Charges	58.4%
Amount to be Written Off	\$91,298	Facility	H/UCLA Medical Center

JUSTIFICATION

The above compromise offer of settlement is the highest amount that could be negotiated with the patient's insurance (Commercial or HMO) under the circumstances of the case.